

Putting the A back in MCH: How a Multi-Disciplinary Learning Collaborative Sought to Increase the Capacity of State Title V Programs to Improve Preventive Services for AYAs

APHA 2019 Annual Meeting and Expo

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Washington, DC

Presenter Disclosures

Iliana S. White

The following personal financial relationships with commercial interests relevant to this presentation existed during the past 12 months:

No relationships to disclose

What will be shared...

- **Objectives**

- Describe 2-3 accomplishments of the multi-state learning collaborative in relation to increased access and quality of preventive services for adolescents and young adults.
- Assess at least 2 means in which the state MCH programs and partners increased their capacity to implement Q.I. activities to serve the needs of adolescents.
- Identify at least 1 method to adapt traditional quality improvement approaches to address population health aims.

Acknowledgements

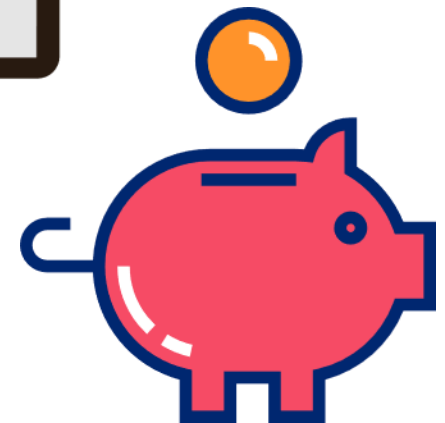
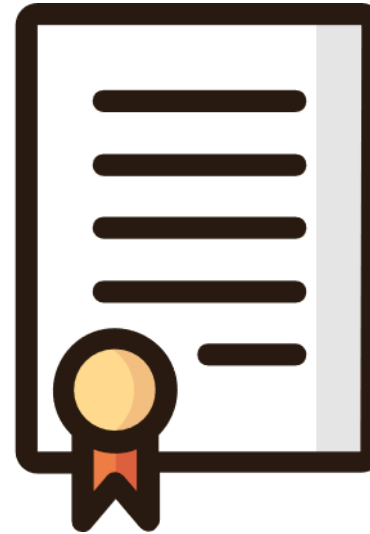


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- Supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$1,350,000.
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What is Title V?

- The nation's longest standing public health legislation focused solely on improving the health of all mothers and children, including adolescents
- Appropriates funds to states to:
 - Ensure access to **quality health services**
 - Promote the health of children by providing **preventive and primary care services**
 - Improve **transition** from pediatric to adult health care





2015→ New performance measures introduced

TRANSFORMATION: MCH 3.0

The Adolescent & Young Adult Health National Resource Center



Purpose

To improve the **health of adolescent and young adults** (ages 10-25) by strengthening the capacity of **state maternal and child health (MCH) programs** and their **clinical partners** to address the needs of adolescents and young adults

Adolescent
& Young Adult
Health
National Resource Center

University of California
San Francisco

NAHIC

AMCHP
ASSOCIATION OF MATERNAL & CHILD HEALTH PROGRAMS

sahrc

State Adolescent Health Resource Center
University of Minnesota

NIPN

national improvement
Partnership Network

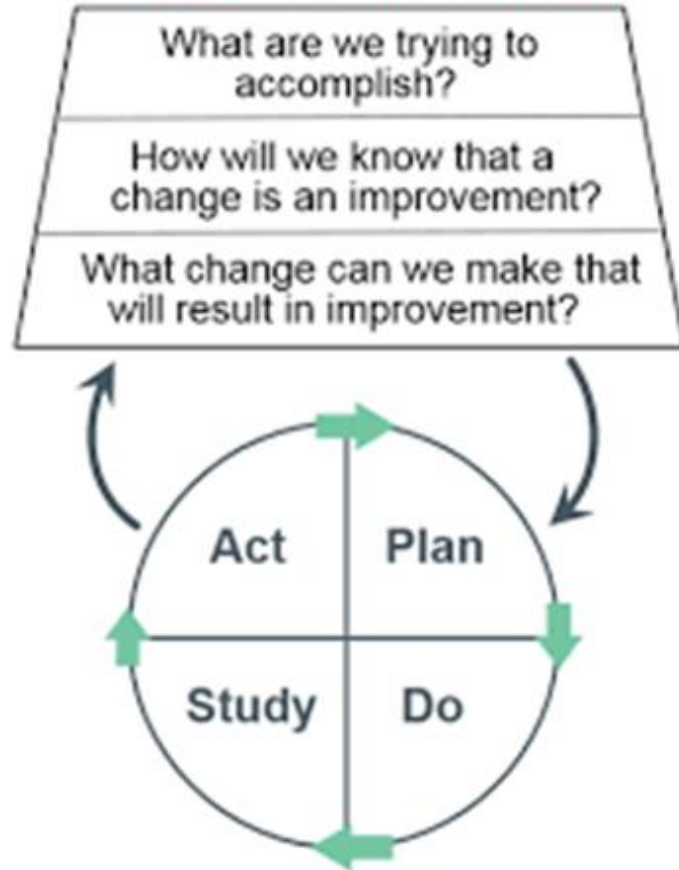
University of Vermont



How does public health influence a clinical outcome???

SHIFTING THE APPROACH

Model for Improvement



- Improvement → Do things **better**
- Innovation → Do things **differently**
- Driven by Plan-Do-Study-Act Cycles (PDSA)
 - Quick, rapid tests of strategies or approaches

Collaborative Improvement and Innovation Network (CoIIN)

- Adopted from Model for Improvement
- Aims to identify **effective, replicable strategies** for increasing access to, receipt of, and quality of preventive health services for adolescents (and young adults)
- Intensive work with 12 multidisciplinary state teams, led by MCH

CoIIN Central

National Strategies:

1. To the door: Improving access to services and engaging youth, their families and clinics to increase uptake
2. In the door: Improving delivery of youth-centered, family engaged care
3. Across the state: Improving state- and systems-level policies and practices

Team Make-Up:

- Youth & Young Adult Leaders
- Title V/MCH Leadership
- State Adol. Health Program
- Q.I. Partners
- Epidemiology & Data Experts
- Medicaid & Other Health Ins.
- Safety-Net Systems & Access Points
- Primary Care Providers & other Health Professionals
- Community Organizations
- Public-Private Improvement Partnerships



EVERY AGE.
EVEN TEENAGE.

SCHEDULE YOUR TEEN AN
ANNUAL WELL VISIT.



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Clinical Q.I. Activities

- **Building capacity of providers & staff**
 - Evidence-based guidelines for preventive services
 - Aligning service delivery with developmental stages and needs of the AYA patient
 - Confidential care
 - Positive Youth Development (PYD)
 - Strengths-based approach
- **Strengthening site-level policies and practices**
 - Appts, confidentiality/privacy in communications, physical facilities and environment
- **Evaluation via a Patient Satisfaction Survey**

VCHIP
Vermont Child Health Improvement Program
A COMMITMENT TO THE WELL-BEING OF EVERY CHILD IN VERMONT

Adolescent & Young Adult Health
National Resource Center

THE ADOLESCENT AND YOUNG ADULT (AYA) PATIENT SATISFACTION SURVEY

Your input is very important!
Let us know what you think!

GET THE SURVEY!

On your Smart Phone

English version: bit.ly/1Xnjs8g En Español: bit.ly/1Xnjs8g

On your Computer

Survey Information

- This is a confidential survey and **completely anonymous**. Patients taking the survey are not asked for any identifying information. The information from the survey will not be linked to a patient's health record.
- The survey **should only take about 4-5 minutes to complete**. (It may take slightly longer for younger adolescent patients).

Repeating text at the bottom: Patient Satisfaction Survey bit.ly/1Xnjs8g

Creating institutional changes

- Efforts focused on access and quality cores of CoIIN informed the needs of **system-level** improvement





Methods to the madness

WHAT WE HAVE LEARNED AND GAINED

That Data Piece....

- Being okay with “good enough”
- Improvement cycles for an annual measure cannot be implemented for lengthy period of time to determine if changes will increase well-visit rates
- Finding measures that serve as a proxy
 - What will influence more uptake?
 - What will create a more high-quality encounter?

Change Packages Menu About Glossary Resources Help



**Adolescent
& Young Adult
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National Resource Center

Transforming Health Care for Adolescents and Young Adults

Change Package Concepts, Strategies, and Materials to Improve Access to and Quality of Preventive Service Visits

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< PREV NEXT >

Spreading and scaling the Q.I. experience

CHANGE PACKAGES



Putting the “A” in MCAH

YOUNG PEOPLE HAVE TO LEAD THE EQUATION

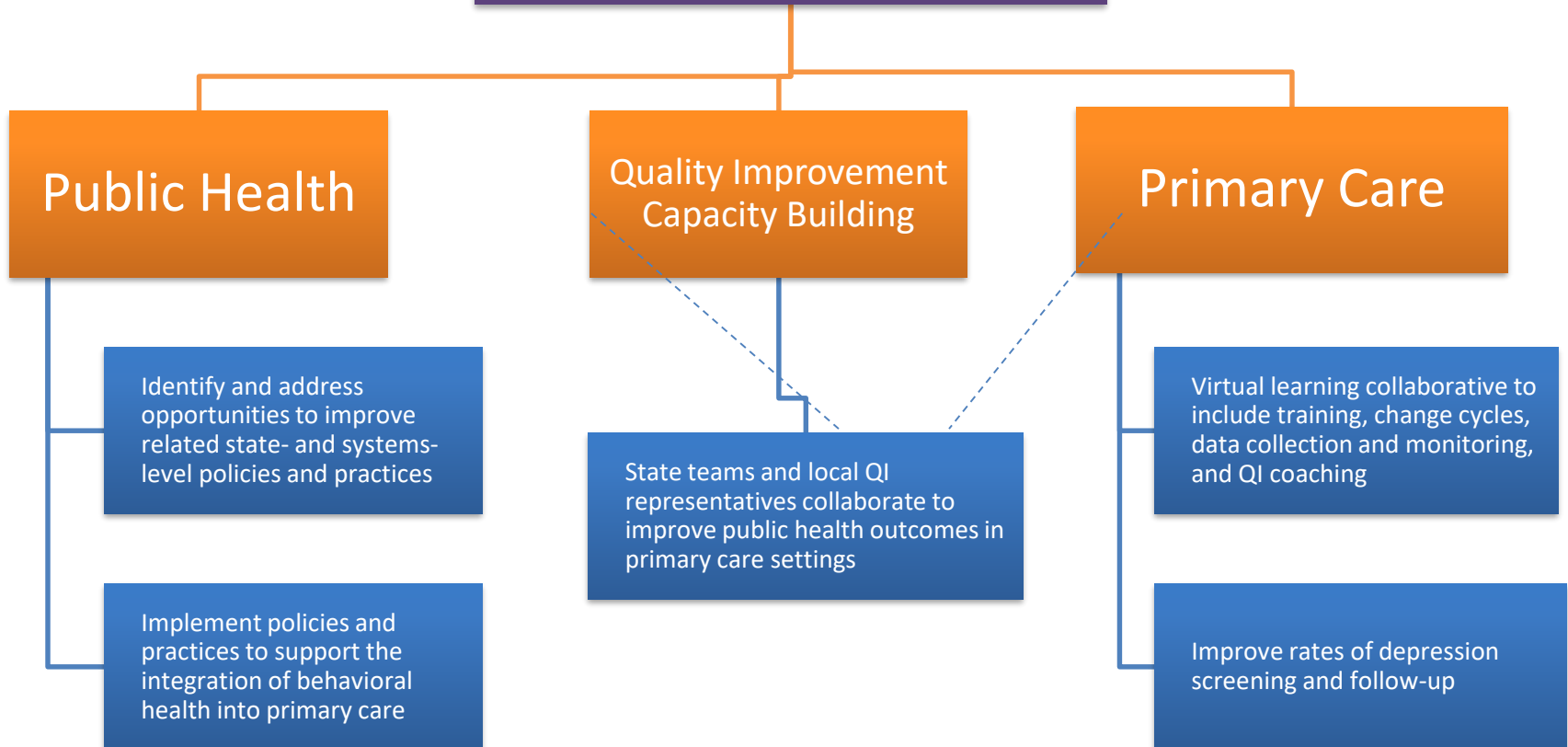


Application beyond well-visits....

FOCUS ON SOCIAL & EMOTIONAL WELL-BEING

80%

AYA Behavioral Health CoIIN



Mobilizing Measures & Roles



Leadership



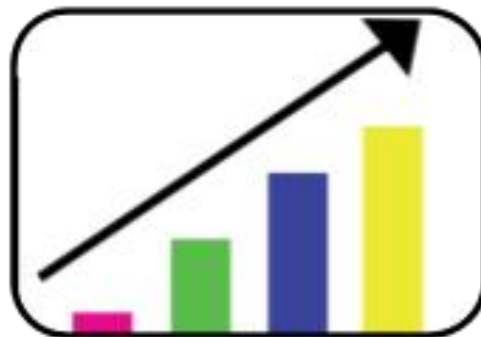
Partnerships



Leveraging Initiatives



Augmenting MCH
Capacity



Assessment,
Measurement, and
Monitoring

Thank you!

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